the entire Board, meeting in Atlantic City, New Jersey, on June 7, 8, and 9, 1940, immediately prior to the annual meeting of the American Medical Association to be held in New York City from June 10 to 14, inclusive.

Applications for admission to Group A, Part II, examinations must be on file in the secretary's office not later than March 15, 1940.

For further information and application blanks, address Dr. Paul Titus, Secretary, 1015 Highland Building, Pittsburgh (6), Pennsylvania.

Public Health Service at the University of California. More than 44,000 men, women, and children from fifty-six counties of California received treatment in the medical clinics of the University of California, and 8,300 of them were hospitalized at the University Hospital during the past two years.

This fact is pointed out by President Robert Gordon Sproul in his current biennial report to Governor Culbert L. Olson, which outlines the great number of public services which the University performs in addition to its instruction of more than 25,000 resident students.

These figures, President Sproul points out, do not include 5,449 other citizens of California who were sent directly to the University Hospital without passing through the clinics for diagnosis. In addition, the dental clinics of the University provided treatment for 12,446 people of limited means during the same period. These treatments were given for the cost of materials and labor to individuals who otherwise would probably have been forced to neglect their dental needs.

"This service," President Sproul adds, "was not confined to patients within commuting distance of the Medical Center in San Francisco, but covered the entire state. Under the Medical Clinic program any general practitioner in the state who is confronted by an obscure ailment, the nature or treatment of which is in doubt, may send his patient to the Medical Center for a complete examination, after which recommendations for treatment are made. Up to the present time one out of every three physicians in the state has availed himself of this service. The result has been more efficient care for the sick.

"Correlated with this activity has been that of the State Medical Library Package Service. Under this plan central repositories for medical works have been established at the Medical Center and at the Postgraduate School on the Los Angeles campus. Its purpose is to make available to physicians of the state journals and books which they cannot afford to purchase but which will aid them in improving their service to the public. During the past biennium an average of 1,200 physicians have borrowed from the libraries each year.

"Notable advances have also been made in medical research. Among these may be mentioned a new method for rapid detection of psittacosis, or 'parrot fever'; determination of the cause of poisoning brought on by consumption of Pacific Coast shellfish; evidence to show that infantile paralysis is not a single disease but a series of closely related ailments; and progress made in determining the cause of progressive, incurable deafness."

Press Clippings.—Some news items from the daily press on matters related to medical practice, follow:

"Health" Bill Is Defeated

Sacramento, June 14 (UP).—A state system of compulsory health insurance, pledged by Governor Culbert L. Olson and opposed as "government interference" by the State Medical Association, was overwhelmingly defeated by the California Assembly last night, 20 to 48.

The bill called for a program estimated to cost \$60,000,000 a year for medical benefits and hospitalization for employees earning less than \$3,000 annually. Employee tax

and employer contribution, similar in character to the State Unemployment Compensation Act, was to have financed the measures.

Roundly assailed by the Medical Association, although highly praised by individual physicians, the defeated measure at least prompted a voluntary insurance scheme from the Medical Association itself.

The California Physicians' Service, under the leadership of Dr. Ray Lyman Wilbur of Stanford University, already is in operation. Insurance is limited to employed groups of five or more persons earning less than \$3,000 a year. For \$2.50 a month per person, subscribers receive complete medical and surgical care.

Under the profession's plan, patients may choose their own doctors, who are paid standard sums by the California Physicians' Service.—Los Angeles *Herald*, June 14.

State Health Insurance Bill Loses

Sacramento, June 13 (AP).—The State Assembly tonight overwhelmingly rejected an Administration bill calling for the establishment of a compulsory state health insurance program.

The House voted, 48 no to 20 aye, against the Rosenthal bill on the subject. Tonight's vote formally settled the matter. Earlier in the session an amendment was defeated which would have required a ratifying vote of the people at a general election before the bill became effective.—Los Angeles *Times*, June 14.

Death Stroke Dealt Olson Health Plan

Sacramento, June 14.—Compulsory state health insurance was in the Legislature's graveyard today.

By a vote of 48 to 20 the lower House overwhelmingly defeated virtually this last of the Administration's measures.

Introduced by Assemblyman Ben Rosenthal, the measure carried the backing of Governor Culbert L. Olson, who sponsored it as a part of the platform on which he was elected.

The vote, however, was mainly a formality.

Earlier in the session an amendment was defeated which would have required a ratifying vote of the people at a general election before the bill became effective. Vote on the amendment was considered a test.

Most legislators had felt the bill would be allowed to die without forcing another roll call.

In presenting the measure, Rosenthal advanced it as "the most progressive piece of legislation this session."

It provided for employer-employee contributions to finance the plan.—San Francisco Call-Bulletin, June 14.

* * * What Goes On?*

A Morning Thought-

When one's all right, he's prone to spite
The doctor's peaceful mission;
But when he's sick, it's loud and quick
He bawls for a physician.
—Eugene Field.

The Olson compulsory insurance plan would impose a clerical detail on busy physicians that they should not be compelled to bear. Besides which, if anyone thinks such a service would be an improvement on the present free clinic plan, he is entitled to at least one more think.

Naturally, a full-paying patient is going to get first call on the services of his physician and on his time and research necessary to a proper diagnosis and treatment of individual requirements.

With mechanized state medical care, doctors would be deluged with hypochondriacs determined to get their "money's worth." Each of these "cases" would require a record kept and voluminous reports made to a state authority set up for the purpose. Gradually and inevitably this medical oversight would be shunted over to less experienced assistants.

Doctors Give Freely of Time and Talent

There is hardly a physician, including those at the head of their profession or leaders in specialized fields, who does not now give an appreciable percentage of his time and freely devote his talent to work either in clinic, hospital, or the privacy of his own consulting room (usually all three) for which he gets no pay at all or remuneration entirely out of proportion to the services rendered.

It is no secret that physicians and surgeons have a sliding scale of charges, and what's wrong with that? We know two men who recently underwent complicated, almost identical, major operations. One of these patients paid \$1,000 for the job; the other, \$50 at the rate of \$5 a month. The \$50 meant far more to that individual than the \$1,000

^{*} By Chapin Hall.

did to the other patient, yet by reason of youth and inherent possibilities for future usefulness, the \$50 man is by far of greater potential value to his fellow men. Besides, compulsory anything is abhorrent to democratic ideals—even compulsory health.

Hire a Doctor for Two-Fifty a Month

The California Medical Association has worked out a better scheme that lacks the mass compulsion of the state plan; costs little more except that the tax is not hidden and at the same time gives those who prefer medical insurance without public exposure a chance to have it.

Under this plan the insured would pay \$2.50 a month into a professionally controlled central agency. When ill he may choose his own physician and hospital. For 50 cents a month less, or \$2, the patient gets the same service, except he must pay regular charges for the first two visits. This to discourage trivial demands upon the doctor's time.

This form of insurance, which is the Medical Association's counter proposal to the socialized, bunglesome state plan, would apply at first to employed groups whose members earn no more than \$3,000 a year. It seems a far more sensible approach to a problem that has been largely whipped up from very frothy ingredients. . . . —Los Angeles Times, May 13.

Hospital Bill Signed by Olson

Nonprofit Service Groups Permitted by Johnson Measure

Sacramento, June 14 (Exclusive).—Signing of Assembly Bill 1712, dealing with nonprofit hospital service corporations, was announced by Governor Olson today.

The bill, by Assemblyman Gardiner Johnson, amends the insurance code so as to provide that hospital associations may indemnify beneficiaries or subscribers for the cost and expense of professional medical services rendered in connection with hospitalization.

The measure permits any nonprofit hospital service corporation to merge or consolidate with any old company or corporation operating as a nonprofit hospital corporation and provides procedure. Such corporations shall be exempt from taxes other than real estate and office equipment taxes. Through the agency of this measure it is expected that hospital service can be rendered subscribers to any plan at a cost within the ability of many who now find costs almost prohibitive, according to the sponsors of the bill.

Premarital Examination Bill Signed

Sacramento, June 5 (AP).—The Kenny bill, requiring a premarital syphilis test, was enacted into California law today with the signature of Governor Olson.

Under terms of the bill a judge of the Superior Court may waive the requirements or authorize a marriage even if one of the parties is infected.

Other details of the measure include:

Misrepresentation of identity or other essential facts called for on the certificate renders the person guilty of a misdemeanor, and the county clerk issuing a license in violation of the law's provisions also is guilty of a misdemeanor.

All records of the tests are private.—Los Angeles Times, June 6.

Mothers to Get Syphilis Tests

Sacramento, May 11 (Special to The News).—Governor Olson today approved a bill passed by the Legislature providing for the examination of pregnant mothers to curb the spread of syphilis.

Under provisions of the measure, which will become law some time in September, licensed physicians will be required to make the prenatal tests, submit confidential reports to the state so that steps may be taken to treat the infected women to safeguard the health of the children prior to birth.—San Francisco News, May 11.

Doctors Pledge Aid to City

Coöperation of the San Francisco County Medical Society and heads of various hospitals and clinics was sought and gained yesterday by the Department of Public Health in solving the problem of giving premarital examinations to local residents.

At a meeting at the Health Center building it was decided that all those who apply for marriage licenses be referred to their physicians or established clinics by the department; that physicians will charge the lowest possible fee for such examinations; that those enrolled in medical clinics shall have the examination performed there at regular clinic rates, and finally that the Department of Public Health will assist the clinics in carrying the serological burden of any

such applicant who may be judged indigent and unable to pay clinic rates.

Those meeting with Health Director J. C. Geiger were Doctors Langley Porter, Edwin Bruck, O. W. Whitecotton, L. B. Coblentz, Norman Epstein and George K. Herzog; Miss Raymonda Dawson of Mary's Help Hospital, Miss Elizabeth Senicul of St. Mary's Hospital and Miss Juliet Eisendrath of Children's Hospital.

A list of clinics is now being prepared for the marriage license bureau, Doctor Geiger said.

Belief there will be no permanent reduction in the number of marriages performed in California because of the new law was expressed by Dr. W. M. Dickie, State Health Director.

He said the only people expressing fear the law would not work and would cause people to be married out of the State were the old and middle-aged whom the law would not affect.—San Francisco *Chronicle*, June 22.

State Medical Act Case Is Delayed

Municipal Judge Harold B. Landreth today delayed until June 21 final arguments on the probation pleas of Edward C. Hurlbert and his wife, Olive, who pleaded guilty to violating the Medical Practice Act by dispensing a so-called "sure cure" for tuberculosis.

The court instructed Deputy City Attorney John Concannon and Defense Attorney Grant Cooper to present their final arguments summing up their cases a week from today.

Hurlbert was called to the stand yesterday as one of the final witnesses for the defense to explain his alleged cure.

He said that he considered his treatment a sure cure "if the patient is not too far gone." Hurlbert denied that the name of his product, "Erus Eruc," which spells "sure cure" backwards, was intended to convince patients that they were certain to be cured in all cases.

C. E. Grier, Chairman of the San Bernardino County Board of Supervisors and staunch supported of the Hurlbert cure, read into the record a resolution adopted by the Board urging the court to give favorable consideration to the probation appeal.—Los Angeles Evening Herald and Express, June 14.

Growing Concern in Public Health

A shift in interest from education to public health is indicated by a survey of the monetary assistance granted by 243 leading foundations during 1937, the latest year for which complete figures could be had. For medical research, medical education, the erection and support of hospitals and for other purposes related to medicine and public health, these foundations granted in the year named \$13,495,898, or slightly more than one-third of their total disbursements.

Education, for many years the foremost concern of foundations, dropped to second place and received but one-fourth, or \$9,170,318, of the total gifts. The other leading fields in which foundations subsidize projects are, in the order of their importance from the standpoint of grants: social welfare, \$4,695,880; the physical and biological sciences, \$2,253,298; government and public administration, \$1,710,598; economics, \$1,353,386.

Public health is unquestionably the outstanding concern of many groups. The fact is reflected in the many proposals for government participation in its promotion. Health of the individual, health of the community, health of the nation, are among the things most to be desired. But the approach should be made with that surety which can come only with the test of experience.—Napa Register.

Citizen Doctor Bill to Olson

Sacramento, June 20 (INS).—Further applicants to practice medicine in California would have to be United States citizens, if a bill now before Governor Olson receives his signature.

The measure was introduced by Chester Gannon, Sacramento Assemblyman.

It provides that after July 1, 1940, all applicants wishing to be licensed by the state medical and osteopathic boards shall either be citizens or prove they were enrolled in a medical school before the 1940 date.—San Francisco Call-Bulletin, June 20.

Attorneys Discuss Low Rate Legal Service

Los Angeles lawyers today were discussing proposals which have been advanced in various sections of the country for the establishment of legal service groups whose members would make small, regular payments for legal advice when needed.

Whether the American Bar Association should permit its members to serve such groups is a question that will be debated at the annual meeting of the Association next month at San Francisco.

In a report to be presented to the meeting, the Association's Committee on Professional Ethics and Grievances reports that the volume of inquiry from persons who are considering the formation of groups for the purpose of obtaining legal services at low rates is interesting. The problem is one which the profession soon must solve, according to the committee, which states:

ording to the committee, which states:

"There has been much discussion in recent years of the profession's duty to provide legal services for all persons at such rates as they are able to pay, and free of charge for those who are unable to pay anything.

"The idea of the free legal aid bureau has spread rapidly in recent years as the result of the profession's recognition of its duty to those who need legal service and cannot pay therefor. . . .

"But the type of enterprise about which inquiry is most frequently made contemplates an association of individuals, not necessarily unable to pay ordinary rates, for the sole purpose of obtaining for themselves legal services in return for regularly paid small membership fees. In general, such schemes contemplate advertising for, or solicitation of, prospective members of the society.

"Up to this time the view has been held that a lawyer engaged by such a society, group or other organization, may not properly render services to its members concerning their individual affairs, but is limited to serving the organization itself in respect to its group or corporate affairs.

"Whether this view will be able to maintain itself in the face of a demand by people who desire to effect a coöperative arrangement for legal services when needed, without any thought of other profit, by making small regular payments, remains to be seen. . . "—Los Angeles Evening Herald and Express, June 13.

University of California Medics Tell New Heart Aid

Using a simple therapeutic process, the University of California Medical School has developed an effective cure for angina pectoris, dreaded and painful heart disease.

This was the announcement today of the medical staff, saying they felt justified in announcing the conclusion that a way has been found to check the mounting toll of incapacities from this disease.

Aid to Obesity

Treatment requires the use of a specially designed abdominal belt, which increases the amount of returned venous blood to the heart. The belt raises the intra-abdominal pressure, sending the blood back to the heart.

In cases of obesity, the belt further relieves the counterweight of the abdomen on the diaphragm, allowing the diaphragm to function more normally, the medical experts said.

Apparently hopeless cases have experienced return to normal activities through the use of the new treatment.

The discovery of the treatment was made possible by a Coronado woman, Lillie Spreckels Wegeforth, who established a fellowship for the study of cardiovascular disease at the University.

Initial development of the process was made by Dr. William J. Kerr, head of the University Medical School and Dr. John B. Lagen.

Possibilities Found

Designed at first to relieve certain lung conditions, the belt was discovered to have possibilities in treatment of heart maladies and its development as a method of curing angina pectoris followed. — San Francisco Call-Bulletin, May 30.

California "Health Bill" Exempts Healing by Prayer*

Sacramento, Calif.—With the approval of Governor Culbert L. Olson, an exemption clause for those who depend upon prayer for healing has been incorporated in the "health insurance" bill now before the California Legislature.

The exemption clause takes the form of an amendment to Assembly Bill 2172 and was adopted without a dissenting vote (68 to 0) by the Assembly on May 16.

Governor Olson gave his approval to the amendment as adopted in preference to others which were proposed. The text of the amendment is as follows:

"Anything in this Act contained to the contrary notwithstanding, any individual who adheres to the faith or teaching of any well-recognized religious sect, denomination or organization, and in accordance with its creed, tenets or principles depends for healing upon prayer in the practice of religion, who is employed by any hiring unit, shall be exempted from the system of health insurance upon filing with the Medical Director an affidavit, in duplicate, stating each adherence and dependence and disclaiming any disability unemployment benefits and medical benefits under the system. Said Medical Director shall forthwith file one of said duplicate affidavits with the hiring unit employing each person and thereupon such hiring unit and the State shall, with respect to that individual, be exempted from liability for the contributions provided by sections 197, 198 and 198.5 of this Act. But this section shall not be construed as exempting any hiring unit from payment to the Health Insurance Fund of the contributions in this Act required of all hiring units not specifically exempted."

Although the above amendment was unanimously adopted by the Assembly, the "health insurance" bill has so far failed to command the support of the majority of the Assembly. The legislators by a vote of 41 to 33 have defeated a proposal to submit the State's comprehensive and compulsory health insurance plan to the voters at the 1940 general election.

Organized opposition to the measure has been actively promoted by the California State Medical Association, which is now carrying into effect its so-called "voluntary" health insurance scheme. The doctors prefer their own plan, under the supervision of medical authorities, to the more widely comprehensive compulsory plan which has the support of the existing administration in California.—Christian Science Monitor, May 23.

Voluntary Health Service in Operation Soon

Repudiation by the State Assembly of the compulsory health insurance bill sponsored by Governor Olson, indicating imminent final defeat of the measure, clears the way for Californians to take advantage of "the doctors' plan" of low-cost voluntary medical and surgical care now being rapidly developed by California Physicians Service, Monsignor Thomas J. O'Dwyer, CPS trustee, said this week.

"The whole-hearted support of California Physicians Service by more than 80 per cent of the licensed doctors of medicine in private practice has made possible tremendous strides in organizing this statewide service during the short period since March 1," said Monsignor O'Dwyer, who is vice-president of the Western Conference-Catholic Hospital Association Southern Council.

The doctors' plan will be in operation within a few weeks at a rate of \$2.50 a month covering full service with hospitalization, or \$2 with patients assuming the cost of the first two doctors' visits. This will be far in advance of the time the compulsory plan would have become operative, even if the State Assembly had not decisively voted against it last week, it was stated.

it last week, it was stated.
"Professional, or doctor, membership in California Physicians Service now represents fifty-seven of California's fifty-eight counties and forty counties are represented by the hospitalization associations selected to furnish hospital care," Monsignor O'Dwyer said.

"Medical districts are practically decided upon and the personnel that will administer the plan has been recommended and is rapidly being appointed."

The doctors' plan will at the outset be restricted to members of employed groups or other groups, fraternal, labor, patriotic, etc., which were organized for purposes other than solely getting medical care, but will be extended as rapidly as possible to families of group members, then to individuals. Patients will select their own doctors and hospitals from among affiliates of the service, which now numbers more than 80 per cent of both available doctors and hospitals.—St. Helena Star, May 26.

Sidney Ehrman Urges Fair Trial Be Given Health Insurance Plan

Sidney M. Ehrman, reporting for the tax committee to the board of directors of the California State Chamber of Commerce in San Francisco yesterday, urged that a fair trial be given voluntary health insurance plans now in operation and that more facts be developed before any compulsory plan of medical care is undertaken.

Adopting the report, the State Chamber directors emphasized their position as recognizing the need for health insurance of some form or other, but not endorsing any of the plans now being tried, or as being opposed to compulsory health insurance as such. The State Chamber's opposition to health insurance legislation recently considered by the Legislature was aimed at the inequitable financial provisions of the proposal, and not health insurance itself, whether voluntary or compulsory.

Statement of the State Chamber's position is as follows: "Recognizing that there is a problem of proper medical care for lower income groups which should be faced, the

^{*} By a staff correspondent of The Christian Science Moni-

State Chamber urges that existing voluntary plans be given opportunity for trial and that more factual information be made available to all interested groups to the end that an equitable solution may be found, and reiterates its position of opposition to the compulsory health insurance proposals now before the Legislature, principally because of their inequitable financial and tax provisions."—San Francisco Recorder, June 1.

A Right Stand

The State Chamber of Commerce has adopted a resolution declaring the voluntary plan of the State Medical Association, designed to give better medical service to people of moderate income and means, should be tried out before adopting a tax-supported, compulsory service.

This is a right stand, for the experience of other countries has shown that state medicine means the establishment of a medical bureaucracy, the evils of which are notorious.

As California has a medical service equal to the best in the nation, there is no reason why we should not await the results of the voluntary plan to provide better service to those with low incomes. This, if successful, will insure to every family what it wants and needs—a family physician who has a personal interest in his clients.—San Jose Mercury-Herald, June 2.

College Employees Join Hospital Plan

Pomona College recently joined with two other Southland institutions of higher learning, University of Redlands and Caltech, in permitting its employes, whether faculty or otherwise, to join the Associated Hospital Service of Southern California, "plan group" of hospital protection.

ern California, "plan group" of hospital protection.
Pomona College members of the group, which is operated as a nonprofit corporation under an act of the State Legislature, are entitled to services at Pomona Valley, Upland and Covina hospitals. There is a low-rate expense involved which is paid for by the persons protected. Among features of the service is hospital care for twenty-one days each contract year without added expense.

Members of the college committee which head the local group plan are Professor Kenneth Duncan, Miss Elizabeth Kelley, Professor Roland Tileston and Professor George Burgess.—Claremont *Courier*, June 2.

35 Millions for Relief; Session Ends

By Earl C. Behrens

Sacramento, June 22.—The Legislature adjourned at 7 o'clock tonight after voting a \$35,000,000 "temporary" relief bill and after turning down practically the entire program proposed by Governor Olson....

The session, 131 days, set a new record, the longest previous session, in 1933, lasting 125 days...—San Francisco Chronicle, June 23.

"Socialized Medicine" Wins Oregon Victory

Portland, Ore., June 22 (INS).—"Socialized medicine," bitterly opposed by Dr. Morris Fishbeln, editor of the Journal of the American Medical Association, won its first conquest in Oregon today.

Ending a four-year dispute, the Multnomah County Medical Society announced its approval of the Multnomah Medical Service Bureau, a health insurance organization whose 12,000 members pay \$2 a month for medical care.—San Francisco Call-Bulletin, June 22.

Doctors Urge Wagner Bill Be Defeated*

Health Measure Is Called "Extravagant and Subversive"

By Gerald G. Gross

Laying down a barrage of such descriptions as "inordinately extravagant," "visionary" and "contrary to public policy," heads of the American Medical Association yesterday urged Congress not to pass the proposed national health program.

At a hearing before the Senate Committee on Education and Labor which was marked by several spirited verbal exchanges, the spokesmen for 113,000 American physicians charged that the bill sponsored by Senator Wagner (Democrat) of New York was full of dangerous possibilities.

"The enactment of such a law would be contrary to public policy," said Dr. R. L. Sensenich of South Bend, Ind., a trustee of the American Medical Association.

"Extravagant, Subversive"

"We shall be glad to further scientific medical progress in every possible way, but we cannot fail to oppose a proposal such as S. 1620, which will supplant these high standards by a system which is vague, visionary, inordinately extravagant and subversive of the best interests of an independent and self-reliant people," contributed Dr. R. L. Benson of Portland, Oregon, member of the Oregon State Public Welfare Commission and the State Board of Health.

"Before spending the taxpayers' hard-earned money for the wholesale building of new hospitals, would it not be well to wait until we are utilizing those we have?" asked Dr. Wingate M. Johnson of Winston-Salem, N. C., a member of the American Medical Association House of Delegates and past president of the North Carolina State Medical Society.

"The conclusion that the reduction of sickness and mortality rates awaits only large federal and state appropriations, expended under federal supervision and control, is believed to be without foundation," Dr. R. G. Leland, director of the American Medical Association's bureau of medical economics, told the committee.

Doctor Emerson Speaks

"It is obvious that those who have shared in drafting the Wagner bill have confused in their minds the duties or functions and capacities of the health officer with those of physicians and surgeons concerned with care of the sick," came from Dr. Haven Emerson of Columbia University.

The only witness who did not express outright opposition to the measure was Dr. Milton Robb of Detroit. At the conclusion of his prepared address, devoted solely to description of Michigan's statewide health program under the aegis of the American Medical Association, Senator Wagner asked him:

"Are you opposed to this bill?"

"I'm not sure," was the reply.

With Dr. Rock Sleyster, president of the American Medical Association, presenting the opening statement and Dr. Edward H. Cary, chairman of the legislative committee and past president, introducing the speakers, the frontal attack upon the Wagner bill was launched by a "surprise witness."—Representative Austin (Republican) of Connecticut.

Speaking as a physician who had practiced nearly thirtyfive years rather than as a legislator, Representative Austin centered his objection around the designation of lay persons rather than doctors to administer the health program.

The President. the Secretary of the Treasury, and the Secretary of Labor—none is a physician, yet each is given powers under the health bill which should be delegated only to skilled professionals, Austin said.

He described the measure, which authorized appropriations of \$98,000,000 the first year, as being "pregnant with possibilities," warned that it led to federal competition with private enterprise and gave it as his opinion that the medical care need which the bill would meet is exaggerated.

The liveliest exchange of the day was between Doctor Sensenich and Senator Ellender of Louisiana. The former was sure that the proposed legislation would make Washington the country's medical dictator. The senator denied that the bill contained such authority, "but if it does I'll never vote for it."

Senator Wagner interposed a short speech in which he denied that his bill was drafted with any intent of federal interference with the states. In spite of skillful oratorical parrying, he failed to shake any constructive suggestions out of Doctor Sensenich. At one point, when it appeared that Wagner might get the doctor to approve the bill if certain changes were made, Doctor Cary gave a signal from the "coaching line" warning the witness to make no concession.

They will conclude their testimony this morning when Dr. Morris Fishbein, editor of the Association's famous journal, and Dr. Gordon Heyd of New York, a past president of the American Medical Association, go before the committee.—Washington, D. C., Post, May 26.

Picking Tick Off Husband Causes Death from Rocky Mountain Spotted Fever.—A fatal case of Rocky Mountain spotted fever, in which a woman was apparently infected by picking a tick off her husband, is reported in The Journal of the American Medical Association for May 6, by E. Herbert Bauersfeld, M. D., Washington, D. C. Her husband remained in good health. Doctor Bauersfeld says he does not know whether she mashed the tick in her fingers. "R. E. Dyer, M. D., has traced the source of infection in several cases to mashing ticks between the fingers after removing them from dogs," the author says.

^{*} For editorial comment, see page 4.